

Downtown Moberly CID Pitch Pool Fund Application

Complete the following application and attach this application to your business plan, the checklist for the business plan is attached. Return the application and two (2) copies of your plan to:

Moberly Area EDC
115 N Williams
Moberly, MO 65270

Applicant Company Name: _____

FEIN _____ **Corporation:** Y/N (circle one)

If yes does the company have permission from the board to request this funding? Y/N¹

Contact Person: _____

Daytime Phone Number: _____

E-mail: _____

Contact Mailing Address: _____

Purpose of Funding _____

Business Location & or Legal Description _____

Proposed Project Period (Circle one of the following)

12 months 24 months 36 months

Total Number of Jobs to be Created: _____ Full-time _____ Part-time

Estimated Total Payroll to be Created: _____

Total Loan Amount Requested from Downtown CID Pitch Pool Fund: _____

Total Amount Financed by Other Sources: _____

Length of Loan Requested: **36 months 48 months 60 months**

¹ All Corporations are required a letter signed by an officer of the corporation to make application.
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Company: _____

By: _____

Name: _____

Title: _____